



Form B6- Drowning

MSCB Reference

CD11/12 xxxx

Form B6 – Drowning

Type of drowning:

- | | | | |
|--------------------------|------------------------|--------------------------|-----------|
| <input type="checkbox"/> | Bath | <input type="checkbox"/> | Domestic |
| <input type="checkbox"/> | Garden pond | <input type="checkbox"/> | Private |
| <input type="checkbox"/> | River / lake / canal | <input type="checkbox"/> | Municipal |
| <input type="checkbox"/> | Swimming pool | <input type="checkbox"/> | Not known |
| <input type="checkbox"/> | Not known | | |
| <input type="checkbox"/> | Other (please specify) | | |

For garden pond / pool drowning:

Was the garden pond or swimming pool secured (fenced)?

- | | |
|--------------------------|-----------|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |
| <input type="checkbox"/> | Not known |